2024 DRX User Training Guide

Broker/Field Agent User: https://molina2.destinationrx.com/PC/Agent

Telesales Agent User: https://molinaam3.destinationrx.com/PC/Agent

MOLINA® HEALTHCARE

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Landing & Beneficiary Page

Landing Page

The dashboard is the landing page when first logging into Connecture for SOA submission or enrollment.

Best Practice is to start with searching for the beneficiary on Connecture first.

- Click Search from the right horizonal navigation bar and then click on Search Beneficiary

Note: The Dashboard page will show enrollments, quotes, and SOA's needing follow up for submission.

Beneficiary Profile Search

Search beneficiaries

First name

Last name

Date of birth

Phone number

Email address

Confirmation number

MBI

Agent username

_____ OR _____

Enter a beneficiary's personal code they mentioned when they contacted you so you can pick up where they left off. We will take you to view plans with their information they already entered.

Personal code

Search profiles

- Use any of the listed fields to search for the beneficiary.

- The more information use the narrow the search.
  - For example, searching only by last name will bring up all individuals with that last name. It is best to use first and last name, and even date of birth.

Note: It is best practice to always collect the confirmation number at the end of the enrollment.

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Beneficiary Search Results

Search results will display existing profiles based on search criteria.

Profile Status	Description
Registrant	Profile Created
Applicant	Application started or Submitted

test Test 123 Champions Vw San Antonio , TX 78258	(210) 000-0000	● Applicant	testagent testagent CNX_testagent	Updated 09/08/2023
24 Test 1111 Branch Spg San Antonio , TX 78258	test@test.com (210) 010-0000	● Registrant	testagent testagent CNX_testagent	Updated 09/15/2023

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Entering the Beneficiary Profile

Entering the beneficiary profile allows the agent to view:

- Enrollment History, including Connecture Confirmation Enrollment Number.

- Check Medicare and Medicaid Eligibility

Note: Medicaid Eligibility Check is only found in the beneficiary profile. Medicaid eligibility check is not on the enrollment form.

Beneficiary Profile Overview Continued

- Agent of Record, resignment does not happen on Connecture.
- Collected SOAs
- Notes
- PDF attachments
- Tasks
- Call Recording – Recording will only populate if recorded on Connecture

Note: Agent of Record changes go through the Broker Support Unit

Beneficiary Profile Overview Continued

- Personal Information
- Quote/Enrolment History

Personal information

*ZIP code

90010   County
Los Angeles, CA

Licensed to sell 1 Medicare organizations with 4 plans for 2024

| *** First name** | *** Last name** | **Date of birth** |
| test | test | 01/01/1950 |

| **Email address** | **Primary phone number** | **Mobile phone number** |
| | (123) 123-1234 | |

☐ Same as primary

Home address

Your Address; if not address type homeless.

test

Address 2

City

Los Angeles

State

CA

Sales information

Is the sales contact different from the beneficiary?

| Yes | No |

Quote history

Quote sent 10/05/2022 8:46 am PST to JAN███████@MOLINAHEALTHCARE.COM   2023

Molina Medicare Choice Care Select (HMO)
Plan type MAPD
Authorization code: TKPRKKPE

Please review this quote at your earliest convenience. Let me know if you have any

Enrollment History

Molina Medicare Complete Care (HMO D-SNP)   Submitted 04/20/2023 5:41 am PST

Medicare Advantage Prescription Drug Plan 2023

Total monthly plan premium $0.00

📄 View application

Click More Details to view App Conf #

More details ⌃

| Enrollment confirmation number | A66712392311671M |

Adding New Beneficiary Profile

If an established profile for the member does not populate. Click create a new profile. Fill out the beneficiary profile.

Note: A profile can also be added by clicking New Profile and then beneficiary on the navigational bar.

Medicaid Eligibility

Medicaid Eligibility is only available in beneficiary profile.

Start with creating or updating the beneficiary to ensure Medicaid eligibility is valid.

Medicaid Eligibility check is not available on the enrollment form.

When checking eligibility be sure to always submit their state issued name, middle initial or name included if applicable.

Note: Using guided help, displays the Medicaid eligibility code is seen Preferences under Get Started.

Medicaid Is Set to Be In All Market with exception:
- CA
- UT

We are actively working on these states to move them to production as soon as possible.

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Call Recording

Call Recording

If an agent cannot physically meet with the beneficiary a telephonic enrollments option is available. All sales calls with beneficiaries or their caregivers are to be recorded in its entirety, including enrollment.

Note: Captive Field and Telesales Agents will continue to use Genesys Telephony system as their primary recording platform. Connecture Call Recording can be used if Genesys is not available for Captive Field Agents.

- Start call recording at beginning of sales presentation.
- Click on **Start Call Recording**
- A pop-up box will populate.
- Select the number and click call beneficiary.
- Prospect will hear recorded message upon receiving call "This call may be recorded for quality and training purposes, press 1 if you agree for the call to be recorded. Otherwise please hang up."
- Click Continue to minimize recording window

Record your call ✕

Start a recording for test test

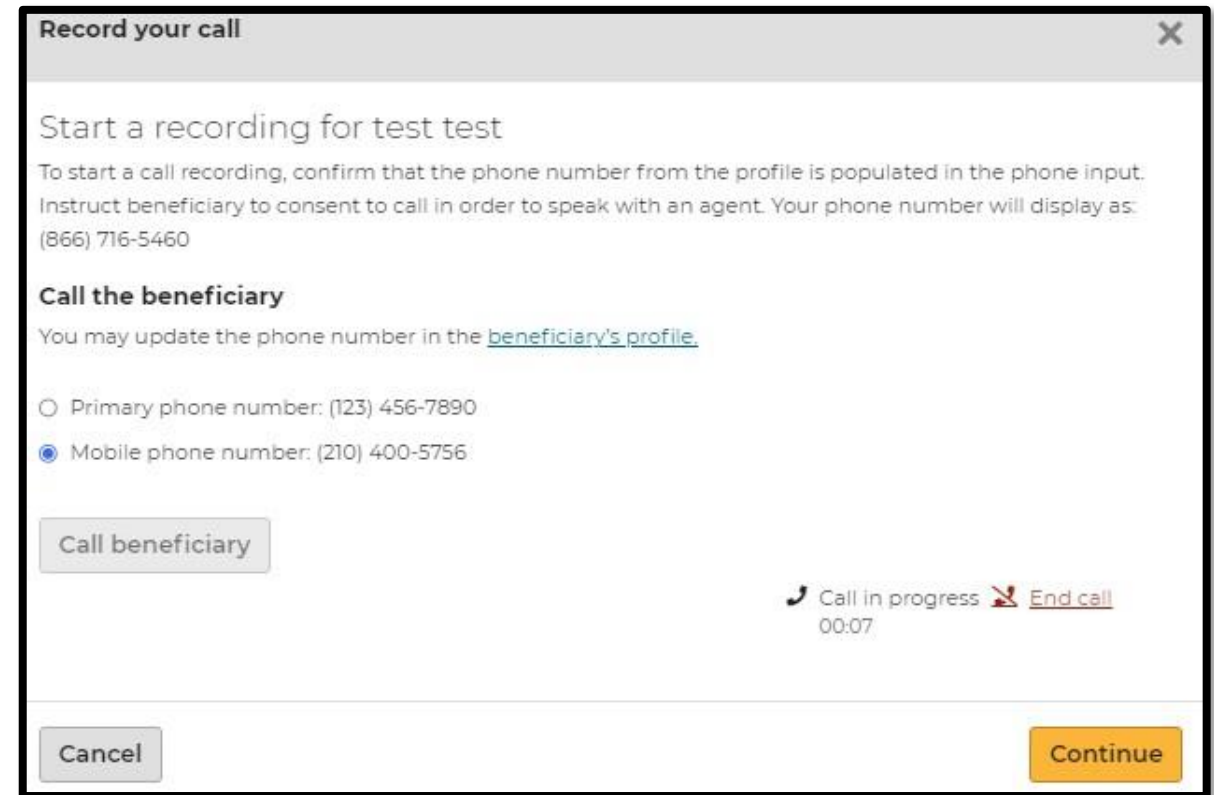To start a call recording, confirm that the phone number from the profile is populated in the phone input. Instruct beneficiary to consent to call in order to speak with an agent. Your phone number will display as: (866) 716-5460

Call the beneficiary
You may update the phone number in the beneficiary's profile.

○ Primary phone number: (123) 456-7890

● Mobile phone number: (210) 400-5756

Call beneficiary

☎ Call in progress ✗ End call
00:07

Cancel | Continue

Telephonic Sales Presentation & Enrollment

Individuals representing Third Party Marketing Organizations are required to disclose below disclaimer on all Telephonic Sales Presentation and Enrollments. This disclaimer must be verbalized within the first minute of the call. The disclaimer cannot be at the end with all the other enrollment disclaimers.

For TPMOs that don't sell for all of the MA organizations or Part D sponsors in a service area: "We do not offer every plan available in your area. Currently we represent [insert number of organizations] organizations which offer [insert number of plans] products in your area. Please contact Medicare.gov, 1-800-MEDICARE, or your local State Health Insurance Program (SHIP) to get information on all of your options."

For TPMOs that sell for all MA organizations or Part D sponsors in a service area: "Currently we represent [insert number of organizations] organizations which offer [insert number of plans] products in your area. You can always contact Medicare.gov, 1-800-MEDICARE, or your local State Health Insurance Program for help with plan choices."

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Telephonic Sales Presentation & Enrollment

Medicare Disclaimer & Scope of Appointment are required on every Telephonic sales presentation and enrollment calls, these disclaimers should be disclosed before going into plan details. These disclaimers are applicable to both internal & external sales agents.

Medicare Disclaimer: This call is recorded for quality assurance purposes. You are not required to provide any health-related information unless it will be used to determine eligibility for enrollment into a Health Plan. I'm going to continue now if that's all right. May I continue?

Scope of Appointment (SOA): Before we proceed, I want to let you know that [Molina Healthcare] [Passport] [Senior Whole Health [of NY]] offers Medicare Part C plans. There is no obligation to enroll in our plans, and this phone call will not affect your current or future enrollment, or automatically enroll you in a Medicare plan. Do you confirm and understand what was just read to you?

Telephonic Sales Presentation & Enrollment

Telephonic Enrollments must meet scripting requirements. All Telephonic Enrollment scripting must be followed and verbalized verbatim in its entirety.

The Telephonic Enrollment scripting will appear in the enrollment application of DRX Connecture. You should start reading all scripting and fields out load to beneficiary starting in Section 1-Contact Info. The scripting begins right below the call out "Fields marked with an..." and continues until Section 5-Ageement & Signature disclaimers.

TE Script Begins

Note: if Beneficiary Profile is not created prior to enrollment, the script will not be personalized.

Call Guide & Telephonic Enrollment Scripts document can also be found:

Internal Field & Telesales - Molins Sales Hub > DRX Connecture > Call Script

External Brokers - Molina Agent Center > Resources > Agent Tool Kits > 2023 Medicare Enrollment Call Scripts – do not edit per CMS

Scope of Appointments (SOAs)

Scope of Appointments

After establishing and reviewing the beneficiary profile, click on Continue to SOA at the bottom of the beneficiary profile.

‹ Previous   Click Here for Guided Help ›   **Continue to SOA**   **Exit Guided Help**

The SOA can be collected several ways.

- Email
- Text
- In-Person
- Print SOA form/ Upload SOA form

Scope of Appointment

✆ Start call recording

A Scope of Appointment (SOA) is needed for all sales appointments and required 48-hours in advance with limited exceptions. Submit the SOA once you have received it from the beneficiary.
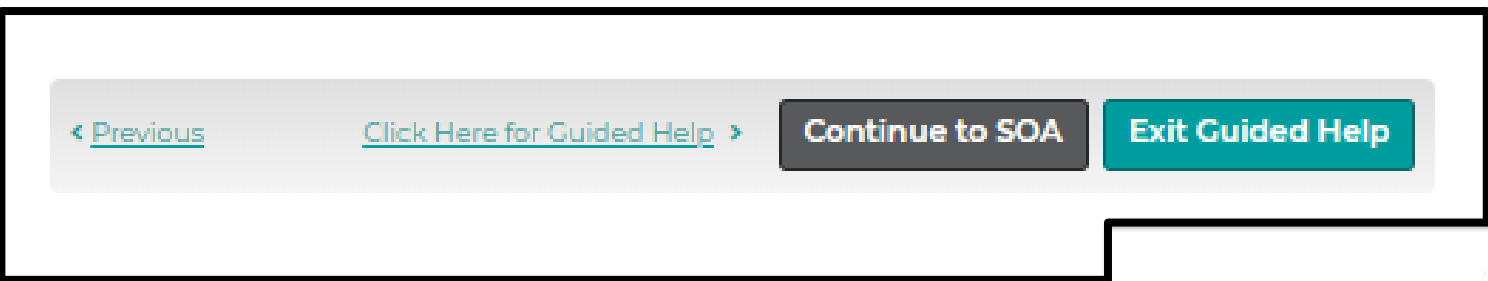
SOAs

You have no SOAs for this profile

🗎 Complete SOA form in-person | 🖨 Print consumer form | ⬆ Upload

Email address

[   ] **Email SOA**

Phone number

[(123) 123-1234] **Text SOA**

‹ Previous   **Click Here for Guided Help**   **Exit Guided Help**

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Emailed and Texted SOAs

Using the email and text message method is fairly simple and can be completed quick.

- Email or text the SOA request to the member.

Email address

[   ] Email SOA

Phone number

[   ] Text SOA

Complete your Scope of Appointment from Molina Healthcare:
https://my.destinationrx.com/hub/s/M1SR87LA
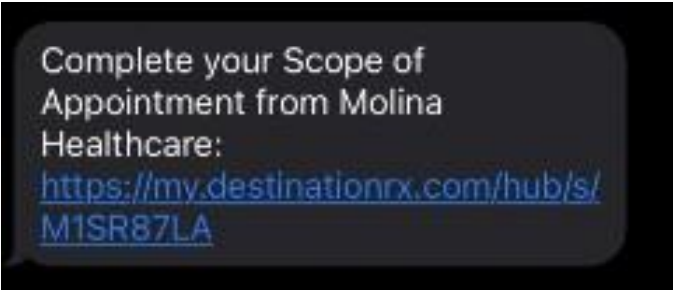
- Member need to Answer form and Submit
- Agent needs to go back to SOA page to complete SOA form.

Scope of Appointment form Inbox

Do.Not.Reply 1:49 AM
to me

Hi test,

I am looking forward to meeting with you...

Please fill out the Scope of Appointment online form. Be sure to select the Medicare health plan options that you are interested in discussing during our visit. It's important that you complete the form prior to our visit since it is required by the Centers for Medicare and Medicaid Services.

Complete "Scope of Appointment" form

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Emailed and Texted SOAs

- Member needs to answer the form and Submit. Once submitted the Thank you message will populate.

- The agent will be alerted via email. "Customer Completed SOA. Once member completes HRA, agent must go back to the beneficiary profile to Complete HRA Form.

Scope of Sales Appointment Confirmation Form

The Centers for Medicare and Medicaid Services requires agents to document the scope of a marketing appointment prior to any face-to-face sales meeting to ensure understanding of what will be discussed between the agent and the Medicare beneficiary (or their authorized representative). All information provided on this form is confidential and should be completed by each person with Medicare or his/her authorized representative.

Fields marked with an asterisk (*) are required.

✅ Thank you, your scope of appointment has been submitted. Please close your browser.
Your broker will get in touch with you soon.

We'll discuss:

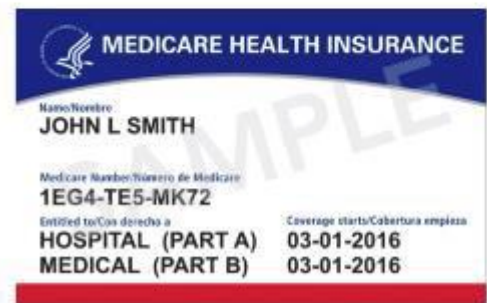- Medicare Advantage Plans Part C and Cost Plans

Make sure you have the following for our meeting:

- Medicare card
- All medications
- List of all your current physicians along with their phone numbers and addresses

✅ Completed by test test on 09/19/2023   • Medicare Advantage Plans Part C and Cost Plans   [Complete form]

MEDICARE HEALTH INSURANCE

Name/Nombre
JOHN L SMITH

Medicare Number/Número de Medicare
1EG4-TE5-MK72

Entitled to/Con derecha a   Coverage starts/Cobertura empieza
HOSPITAL (PART A)   03-01-2016
MEDICAL (PART B)   03-01-2016

Sample Medicare card you will need for the meeting with your broker.

CMS Pending Approval

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Emailed and Texted SOAs

Fill out the SOA as detailed as possible and submit form.

- For Initial Method of Contact Type One of the Following:
  - In-person
  - Outbound Call
  - Inbound Call
  - Email
  - Text Message
  - Group Event

- Use the large free form text box to explain why the SOA was not documented 24 hours prior to the meeting, if applicable.

- Type the plans reviewed during meeting.

- Sign the SOA using the wet signature box and submit.

Scope of Sales Appointment Form (To Be Completed by Agent)

Scope of Appointment form needs to be completed and submitted for all scheduled appointments (even for no-shows, cancelled appointments, or those that do not result in a sale).

Agent First Name*
Jenna

Agent Last Name*
Flores

Agent Phone

Please enter your 10 digit phone number with no hyphen or spaces (e.g., 2125551212).

Initial Method of Contact*

If the SOA form was signed by the beneficiary at time of appointment, provide explanation why SOA was not documented prior to the meeting.

Plan(s) represented during this meeting:*

Date Appointment Completed*
09/20/2023

* ☐ By checking this box, I confirm the information represented here is true and accurate. I authorize my signature on the Scope of Appointment form using this information.

clear

Submit form

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Complete SOA

Once the SOA is completed, a confirmation will populate. It is very important for agents to look for the Confirmation to ensure an SOA was submitted correctly to Connecutre. For internal agents, add the date and time SOA was captured on the lead or opportunity record.

Call Recorded SOA

External Brokers can save a recorded Scope of Appointment in the Beneficiary Profile. Upon Saving the Beneficiary Information, the Profile will be created and a Scope of Appointment (SOA) Scripting will appear at the top of the Profile window.

Profile

🔊 Start call recording

Scope of Appointment (SOA) Scripting (REQUIRED)

Agent: Before we proceed, I want to let you know that **[Molina Healthcare] [Passport by Molina Healthcare] [Senior Whole Health] [Senior Whole Health of New York]** offers Medicare Part C plans. There is no obligation to enroll in our plans, and this phone call will not affect your current or future enrollment, or automatically enroll you in a Medicare plan. Do you confirm and understand what was just read to you?

Once call is connected with beneficiary, click **Continue** to minimize the recording window and view SOA Scripting.

Beneficiary's Name, DOB, Phone Number, and scheduled meeting date/time should be verbalized for recording along with the SOA Script.

Record your call ✕

Start a recording for TEST RXTEST

To start a call recording, confirm that the phone number from the profile is populated in the phone input. Instruct beneficiary to consent to call in order to speak with an agent. Your phone number will display as: (866) 955-3060

Call the beneficiary

You may update the phone number in the beneficiary's profile.

Call beneficiary

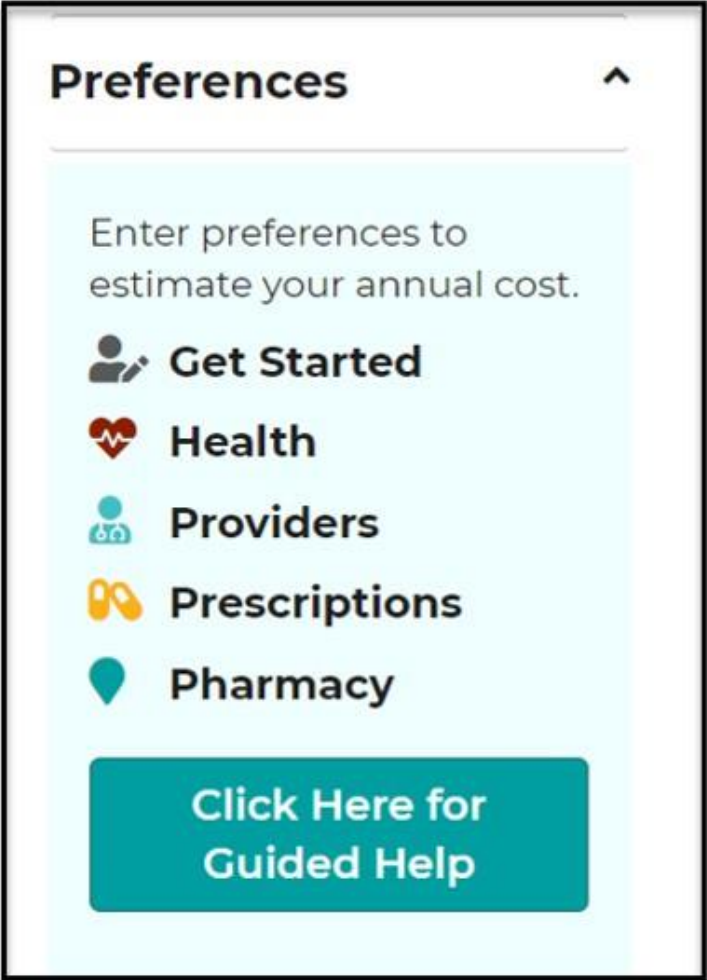🔊 Call in progress ✂ End call
00:58

Cancel

Continue

Plans

Guided Help – A Few Items to Note

Preferences

Preferences ⌃

Enter preferences to estimate your annual cost.

- 👤 **Get Started**
- ❤️ **Health**
- 👥 **Providers**
- 💊 **Prescriptions**
- 📍 **Pharmacy**

Click Here for Guided Help

**Add Preferences for a more personalized member experience.**

Get Started from this page you can identify the beneficiary's subsidy level.

Providers *Please do not use this preference feature, it is still in development. Continue to use the Provider Online Directory to confirm physician network.*

Prescriptions build a medicine cabinet of all current drugs to see drug costs associated with all plan options.

Pharmacy *Please do not use this preference feature, it is still in development. Continue to use the POD-Pharmacy Search to confirm pharmacy network.*

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Guided Help & Plans Page
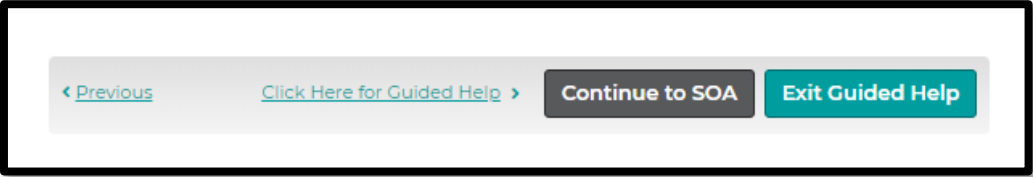
Once member is ready to enroll, SOA is submitted, and call recording is initiated, there are two options at the bottom of the beneficiary profile page:

- Click Here for Guided Help
- Exit Guided Help
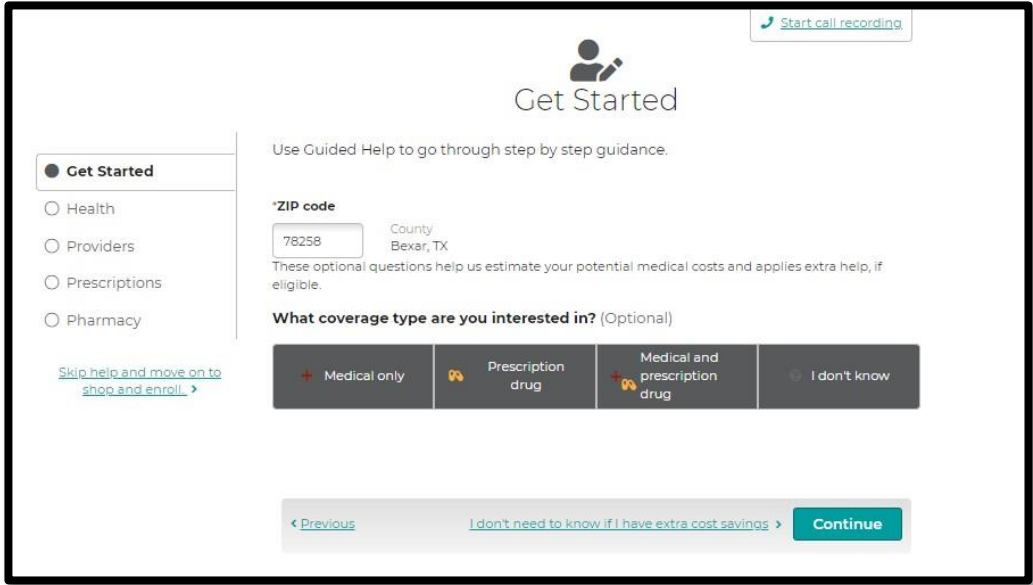
Clicking on Guided Help has benefits such as:
- Adding Health history
- Provider Look Up
- Prescription Look Up
- Pharmacy Look Up

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Add Preferences-Extra Help

Once Subsidy Level is selected. Plans page will reflect adjusted Monthly Premium Amount.

Be sure to select the appropriate Premium Subsidy % and continue with the prompts.

Plan Year Option

During the last quarter of the year you will have the option to switch plans for years 2023 or 2024.

Be sure to select the correct year for the plan option that you will be enrolling.

Guided Help & Plans Page

Exiting Guided Help will lead to the plans page for that market/ state. This page displays options based on beneficiary's zip code.

- The screenshot displays plans for Texas, and show how easily an agent can go back into guided help.

- Clicking on the Plan Benefits button opens up a benefit grid and printable member materials such Summary of Benefits.

- A quote can also be send from this page.

Note: If the plan option with a monthly premium populates, but the beneficiary has Low Income Subsidy, select "Add Preferences" to adjust monthly premium amounts accordingly.

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Plan Options

The total annual cost will populate if guided help questions were answered.

Icons each plan:
- Plan Details
- Click to Enroll
- Add to Quote

There is also an option for plan comparison at the top of the plan option.

Molina Medicare Choice Care (HMO)
Plan ID: H7678-004-000
★★★⯪☆ Medicare Star Rating

View plan details side by side

☐ Add to compare

Medical Deductible	Medical out of pocket maximum	Monthly plan premium
$0	$8,300	$0.00

Continue to Enroll

View plan details, Medicaid Eligibity codes, and Plan Documents.

Plan details

Click to Enroll

Add to quote

Forward plan details vid Text/ Email

Total est. annual cost
$0
Effective Jan 2024

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Plan Details

The plan details page will have more benefits listed this year, and will have very similar language to the Summary of Benefit.

The Plan Details page will also have Medicaid Eligibility codes at the top in Additional Information.

| Plan details | Prescriptions | Health costs | Total estimated costs |

Additional Information	FBDE, QMB+, SLMB+, QMB

Costs ⌃

Plan Premium	$0.00 monthly
Est. drug cost Based on 0 drugs Add/edit	$0 annually
Health cost Add health information if you would like to view estimated annual costs	Add health information
Total est. annual cost Based on plan premium, health and drug costs. (Effective Jan 2024)	$0 annually

Benefits ⌃

Medical Coverage ❓

Medical Deductible	$0.00

Molina Medicare Complete Care (HMO D-SNP)

★★★½☆

Medicare Star Rating

Monthly plan premium
$0.00

Click to Enroll

Send quote

Effective January 2024 ✎

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Enrolling a Beneficiary

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Add To Cart

Once a member decides on a plan, and feels comfortable with moving forward. Start Enrollment by clicking on click to Enroll.

The cart page will populate. There are two options:

Options	Description
Send to beneficiary to sign and submit	Agents complete form and forwards to prospect for submission.
Complete and submit form myself	Agent completes form and submits enrollment (in-person/ telephonic).

Application
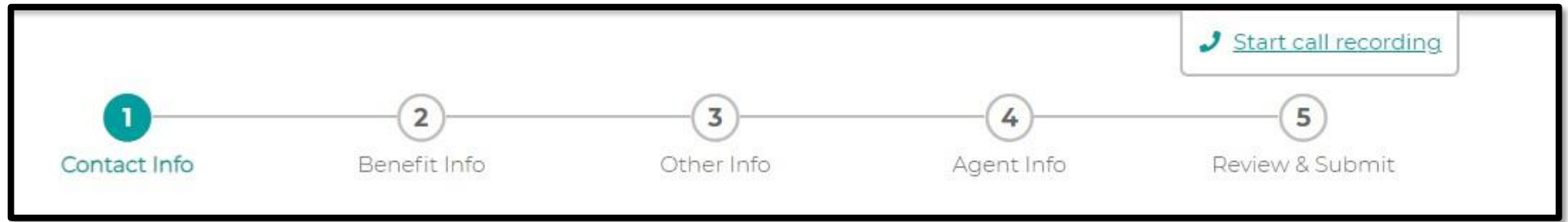
Connecture will walk agents through five different sections before submitting.

Required fields are identified by an asterisk (*). Agents will not be able to move to the next section of there are missing required fields.

1. Basic beneficiary information
2. Entering Medicare ID and adding attachments
3. This page focus on ethnicity, race, employment, provider data, language preference and selecting the correct SEP code.
4. Agent attestation for beneficiary proposed effective date of coverage.
5. Continue and Review, wet signature, enrollment submission.

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Relationship Identifier

Telesales access will view this question in first section of application.

Broker/ Field access will view this view in last section of application.

Processing enrollment with prospect or has given agent verbal authorization for enrollment. This option will populate two boxes for a wet signature. One for the beneficiary, and the other for the agent.

Agents should select this option if the enrollment is processed per legal representative, caretake, volunteer, or authorized individual. That information is required when this option is select.

Please select the statement below that best describes your relationship to the person with Medicare listed on this enrollment form:*

I am the person listed on this enrollment form or I am simply helping to complete this enrollment form.

I am the person authorized to act on behalf of the individual listed on this enrollment form under the laws of the State where the individual resides.

*

☑ I understand that my signature (or the signature of the person legally authorized to act on my behalf) on this application means that I have read and understand the contents of this application. If signed by an authorized representative (as described above), this signature certifies that:
1. This person is authorized under State law to complete this enrollment, and
2. Documentation of this authority is available upon request by Medicare.

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Medicare Eligibility

WIPro integration will validate MBI during the enrollment process. The validation is designed to proactively catch incorrect MBIs, validate Part A and Part B effective dates and subsidy eligibility for DSNPs.

Medicare Information

Please take out your red, white and blue Medicare card to complete this section. In the spaces provided enter your Medicare Number (do not enter dashes).

MEDICARE HEALTH INSURANCE

Name/Nombre
JOHN L SMITH

Medicare Number/Número de Medicare
1EG4-TE5-MK72

Entitled to/Con derecho a   Coverage starts/Cobertura empieza
HOSPITAL (PART A)   03-01-2016
MEDICAL (PART B)   03-01-2016

Medicare Number*   1eg4te5mk72

Hospital (Part A) Effective Date   03/01/2016

Medical (Part B) Effective Date   03/01/2016

Correct the following error(s) on the form, then submit again
Check the Medicare number, last name and date of birth before continuing.

You may still continue with this enrollment application.

This message above will always populate, the message is intended to review beneficiary information carefully before continuing to the next part of the enrollment. Click continue again to get to the third page if updates or corrections are not necessary.

– MBI is cross-referenced with beneficiary's last name and DOB
– If Part A and Part B effective dates do not match, a message will display the correct associated Part A/B effective dates.
– When beneficiary is enrolling into a DSNP, subsidy eligibility level for the MBI will be validated

File Upload

Section 2 has an attachment box at the bottom of the page. Use this box to add any documents related to enrollment. It is best practice to attach any paperwork available related to the POA/ Legal Representation and eligibity.

We must be able to prove Medicare/Medicaid eligibility for every enrollee. To ensure accuracy, completeness, and speed in the enrollment process, please make every possible effort to find and upload the enrollee's eligibility documentation here.

Attachment

Uploading 1 file(s)...

Choose Files | IT TICKET LOG.xlsx

‹ Previous

Continue

Be sure to add any documents that help the enrollment process.

Agents are encouraged to add as much information as possible to the enrollment to avoid RFIs (request for information).

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Agent Info. Applicable to Telesales Access Only.

Agent First Name, Last Name, and NPN will be auto populated based on
our user profile. Telesales Agents DO NOT edit this information.

Broker Support Unit will be assisting with enrollment submissions, these
fields will be edited by BSU pm Agent of Record ONLY.

Beneficiary Signature

Beneficiary's name should only be signed off by beneficiary of authorized rep.

Confirmation

Once enrollment is submitted, take note of the Confirmation, and keep it in a saw place.

Agents will be routed to Icario portal when Complete Health Risk Assessment button is selected.

Find Agent PURL

PURL

Click the caret by your name and select Account overview

On the Account Overview page, upload a professional picture of yourself.
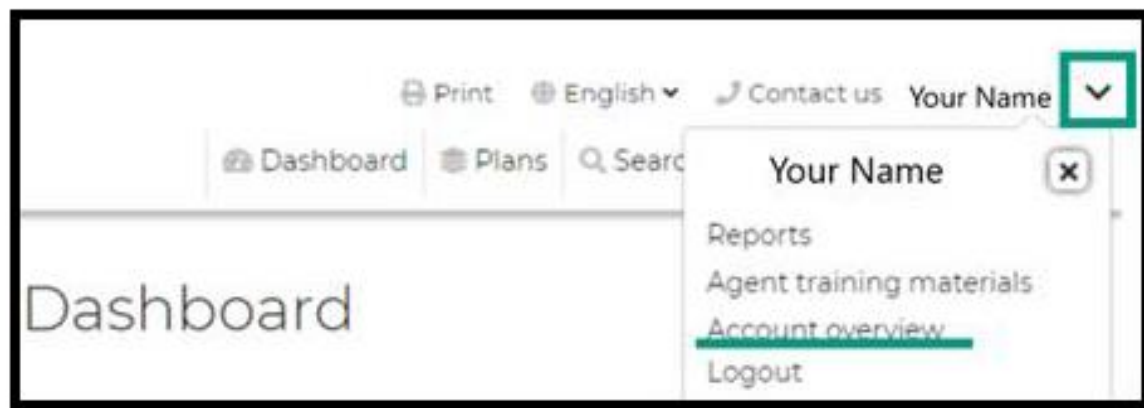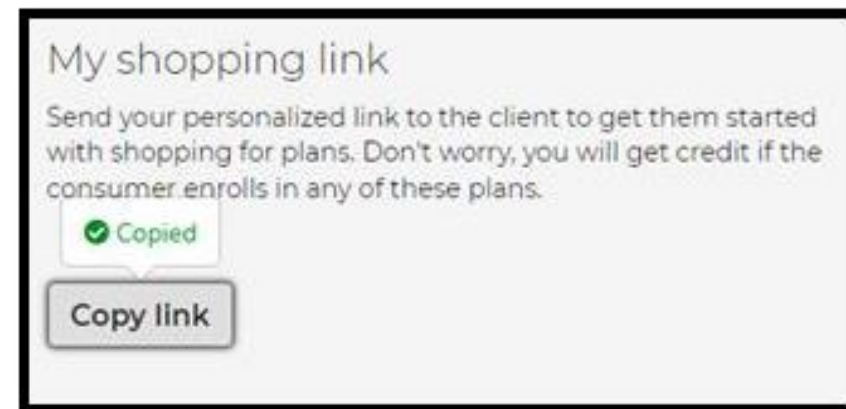

Once Picture is upload. Click Copy Link.

Note: Anyone who uses this link will be able to enroll into Molina Healthcare Medicare plan acknowledging the agent of record.

Be sure to use this link on social media or on your email signature.

Note: Picture must be png or jpeg, less than 5 MB

Broker Support Unit

Contacts

Broker Services Unit (BSU)
(866) 440-9788
Hours: Mon.-Fri. | 6:00 AM-6:00 PM MT
broker@molinahealthcare.com

Broker Contracting
MCRBrokerContracting@molinahealthcare.com

Broker Enrollments
MCREnrollment@molinahealthcare.com

Broker Commissions
MCRCommissionInquiry@molinahealthcare.com

CARE Team
MedicareBrokerCAREteam@molinahealthcare.com

Sales Engagement & Marketing
salesengagement@molinahealthcare.com

Quality Auditor
qualityauditorteam@molinahealthcare.com

Sales Communications & Training
salescomms@molinahealthcare.com

Sales Oversight & Compliance
sales_oversight@molinahealthcare.com

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Questions?

Need more training? Try Connecture video tutorials.

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